

## **1. National Uniform Billing Committee [NUBC]**

- UB04.
  - UB04 Manual available June 1, 2005
  - Print specifications will be made available on the NUBC website: [www.nubc.org](http://www.nubc.org)
  - UB04 can be used as of March 1, 2007 and REQUIRED as of May 23, 2007

The UB-04 is scheduled to replace the UB-92 beginning with bills created on March 1, 2007 in accordance with the following transition:

- March 1, 2007 – Health plans, clearinghouses, and other information support vendors should be ready to handle and accept the new UB-04 form and data set.
- March 1 to May 22, 2007 – Providers can use either the UB-04 or UB-92 forms/data set specifications.
- May 23, 2007 – The UB-92 is discontinued; only the UB-04 form and data set specifications should be used. All rebilling of claims must use the UB-04 from this date forward, even though earlier submissions may have been on the UB-92.

For information on obtaining full color proofs of the form for testing purposes, or a beta release of the corresponding data specifications manual, contact NUBC at [www.nubc.org](http://www.nubc.org).

## **2. National Uniform Code Committee [NUCC]**

The NUCC has drafted a 1500 Reference Instruction Manual detailing how to complete the form. The purpose of this manual is to help standardize nationally the manner in which the form is being completed. The instruction manual has been updated to Version 1.3 7/06 and is currently available at: [www.nucc.org](http://www.nucc.org).

### **Transitioning to the Revised Form**

The NUCC has made modifications to its recommended timeline for transitioning to the revised 1500 Claim Form. The timeline is now:

- **October 1, 2006:** Health plans, clearinghouses, and other information support vendors should be ready to handle and accept the revised (08/05) 1500 Claim Form.
- **October 1, 2006 – March 31, 2007:** Providers can use either the current (12/90) version or the revised (08/05) version of the 1500 Claim Form.
- **April 1, 2007:** The current (12/90) version of the 1500 Claim Form is discontinued; only the revised (08/05) form is to be used. All rebilling of claims should use the revised (08/05) form from this date forward, even though earlier submissions may have been on the current (12/90) 1500 Claim Form.

The NUCC strongly recommends that providers contact their health plans and/or clearinghouses/ vendors prior to submitting a claim on the revised form to ensure that they are prepared to accept the revised form.

Documents related to the release of the revised version of the form, including a PDF of the form, Reference Instruction Manual, change log, transition timeline, and FAQs, are available at [www.nucc.org](http://www.nucc.org).

For more information on the 1500 Claim Form, visit the NUCC website at [www.nucc.org](http://www.nucc.org) or contact Nancy Spector, NUCC Chair, at [nancy.spector@ama-assn.org](mailto:nancy.spector@ama-assn.org).

### **3. ADA – Dental Claim**

#### **Overview**

The ADA Dental Claim Form provides a common format for reporting dental services to a patient's dental benefit plan. ADA policy promotes use and acceptance of the most current version of the ADA Dental Claim Form by dentists and payers.

The latest version of the dental claim form enables reporting of a National Provider Identifier (NPI), in addition to a current proprietary provider identifier, for both the Billing Dentist/Dental Entity and for the Treating Dentist. This version of the form becomes **valid for use on January 1, 2007**.

Three samples of the ADA Dental Claim Form are available for your review. Comprehensive form completion instructions are contained in the ADA publication titled "CDT-2007/2008."

<http://www.ada.org/prof/resources/topics/claimform.asp>

### **4. NPI – National Provider Identifier**

- **CMS NPI Timelines:**

The Centers for Medicare and Medicaid Services announces the following plans for transitioning to the National Provider Identifier (NPI) in the Fee-for Service Medicare Program:

Between May 23, 2005 and January 2, 2006, CMS claims processing systems will accept an existing legacy Medicare number and reject, as unprocessable, any claim that includes only an NPI.

Beginning January 3, 2006, and through October 1, 2006, CMS systems will accept an existing legacy Medicare number **or** an NPI as long as it is accompanied by an existing legacy Medicare number.

Beginning October 2, 2006, and through May 22, 2007, CMS systems will accept an existing legacy Medicare number **and/or** an NPI. This will allow for 6-7 months of provider testing before only an NPI will be accepted by the Medicare Program on May 23, 2007.

Beginning May 23, 2007, our systems will **only** accept an NPI.

For additional information, to complete an NPI application, and to access educational tools, visit <https://nppes.cms.hhs.gov> on the web.

- CMS FAQ 5816 has been updated to clearly indicate that the DEA number cannot be used in an NCPDP transaction after May 23, 2007.

▪ Enumeration Statistics for Arizona:

AZ	22742	6118	28860
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## **5. OMB Timelines**

December 11 Federal Register. Semi-Annual regulatory agenda, a summary of rulemaking actions under development or review by DHHS.

The following HIPAA-related items are on the schedule:

January

Data dissemination processes under the National Provider Identifier (NPI) and any applicable charges for data

March

Proposed rule to revise some of the HIPAA Transactions and Code Sets [TCS] Standards

June

Propose rule to streamline the adoption process for modifications to existing electronic TCS regulations.

## **6. Atypical Provider Enumeration**

Enumeration has the number space that starts with 9.  
Medicaid Integrity Program.